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| SERIAL NUMBER<br>10/698,930 | FILING DATE<br>11/03/2003<br><br>RULE | CLASS<br>446 | GROUP ART UNIT<br>3711 | ATTORNEY DOCKET NO.<br>06181-918001 |
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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/425,992 04/30/2003 PAT 6,843,703 *ax*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *ax*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/31/2004

|  |   |                         |                       |                            |
|--|---|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>MA   | SHEETS<br>DRAWING<br>17 | TOTAL<br>CLAIMS<br>46 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | Verified and Acknowledged<br>Examiner's Signature <i>Alyssa L...</i> Initials <i>ax</i> |                         |                       |                            |

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## TITLE

Electromechanical toy

|                                    |   |   |
|------------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>1368 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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